



Enter your transmittal number

W202609

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP
P.O. Box 4062
Boston, MA
02211

* Note:
For BWSC Permits,
enter the LSP.

A. Permit Information

BWP IW 38

1. Permit Code: 7 or 8 character code from permit instructions

Sewer Connection Permit

3. Type of Project or Activity

Industrial Sewer User in IPP POTW

2. Name of Permit Category

B. Applicant Information - Firm or Individual

Acushnet Company

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

Lastowka

Eric

J

2. Last Name of Individual

3. First Name of Individual

4. MI

PO Box 965

5. Street Address

Fairhaven

MA

02719

508 910 8827

6. City/Town

7. State

8. Zip Code

9. Telephone #

10. Ext. #

Eric Lastowka

Eric.Lastowka@acushnetgolf.com

11. Contact Person

12. e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Acushnet Company

1. Name of Facility, Site Or Individual

215 Duchaine Blvd

2. Street Address

New Bedford

MA

02745

508 979 2000

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. DEP Facility Number (if Known)

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

D. Application Prepared by (if different from Section B)*

1. Name of Firm Or Individual

2. Address

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

E. Permit - Project Coordination

1. Is this project subject to MEPA review? ☐ yes ☐ no
If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

F. Amount Due

Special Provisions:

1. ☐ Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).
There are no fee exemptions for BWSC permits, regardless of applicant status.
2. ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).
3. ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).
4. ☐ Homeowner (according to 310 CMR 4.02).

DEP Use Only

Permit No:

Rec'd Date:

Reviewer:

100632

Check Number

\$1650.00

Dollar Amount

11/29/07

Date

